

Dear Human Services Committee,

I am a physician, a Neuroradiologist in good standing in the community of Abilene, Texas, writing to you from a not only a professional standpoint, but as a citizen and part of an intimate circle of compassionate care givers about a family member who resides at Abilene State Supported Living Center. As policies necessarily changed in March regarding visitation of outsiders to institutions of this type, myself, and my parents, who are almost 80 years of age, were no longer able to visit my brother, Leland, who is severely autistic and resides at the Center. My parents in particular have had a difficult time with the changes; they have faithfully visited my brother every Sunday for decades, bringing him his favorite treats and spending several hours with him. These visits came to an abrupt end in March with the shutdown. My mother has stage 4 breast cancer, which has in the last 6 weeks taken a turn for the worst; she has had to undergo several new rounds of chemotherapy which have left her anorexic and weak, as well as depressed; a significant part of this depression originates from the fact that she is worried she may never get to see my brother again if policies do not change soon, allowing at least some limited visitation.

As a physician, I thoroughly understand the need for appropriate precautions, including personal protective equipment to help shield those members of our society who are potentially the most vulnerable from illness. I take extraordinary precautions around my mother and her compromised state, as does my father, utilizing masks and gloves, as well as social distancing. I believe that allowing limited visitation on at least a case by case basis would not induce excessive risk to my brother or those around him. There are many clients at ASSLC who are not compromised from a medical standpoint, and have severe mental deficits primarily. Protocols could be put in place, for example, on my brother's dorm, to allow the occasional visitor to enter through a side or back door, or at least sequester the other clients as a visitor passes through, to a visitation room, with appropriate PPE attire, social distancing, and vigorous sanitation following the visit.

The pandemic has been difficult from many facets, not only economically but from a psychological standpoint. Mental health and well-being remains at stake

with protracted separation of family members, whether it is nursing homes or SSLC entities. I am sure I am not alone in echoing the sentiment, that as we drag on into our 5th and 6th month of COVID-19, creative and successful ways must and can be found to reunite loved ones who have suffered through this extended separation. Time is certainly of the essence in my personal family's case, and it is my hope that the Committee will understand the urgency by which changes should be enacted in a careful, thoughtful manner. Thank you for your consideration of this letter.

Sincerely,

John H. Bliznak M.D.